## **PHA Plans**

## U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226 (exp 08/31/2009)

Streamlined 5-Year/Annual Version

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

## Streamlined 5-Year Plan for Fiscal Years 2008 - 2012 Streamlined Annual Plan for Fiscal Year 2008

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

HA Code: MI080

# **Streamlined Five-Year PHA Plan Agency Identification**

PHA Name: Traverse City	Housing	g Commission	PHA Number	r: MI080
PHA Fiscal Year Beginnin	ıg: (mm/	<b>(yyyy)</b> 07/2008		
PHA Programs Administe	red:			
Public Housing and Section		ection 8 Only Pu	ıblic Housing Onl	lv
Number of public housing units: Number of S8 units:		· —	er of public housing units	•
☐PHA Consortia: (check b	ox if subr	nitting a joint PHA P	lan and complete	table)
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				
(select all that apply)  Main administrative offic PHA development manag PHA local offices				
Display Locations For PH. The PHA Plans and attachments				ct all that
apply)	•	•	1	
Main administrative offic				
PHA development manag				
PHA local offices (River		· · · · · · · · · · · · · · · · · · ·		
Main administrative office		•		
<ul><li>Main administrative offic</li><li>Main administrative offic</li></ul>				
Public library	e or the s	tate government		
PHA website				
Other (list below)				
<del></del>			/ 1 . 11 d	1 \
PHA Plan Supporting Document  Main business office of the state of the		able for inspection at:	(select all that app	ly)

	me: <b>Traverse City Housing Commission</b> 5-Year Plan for Fiscal Years: <b>2008-2012</b> le: <b>MI080</b>	Annual Plan for FY 2008
	PHA development management offices Other (list below)	
	Streamlined Five-Year PHA Pla	n
	PHA FISCAL YEARS 2008 - 2012 [24 CFR Part 903.12]	
<u>A. N</u>	Mission	
	he PHA's mission for serving the needs of low-income, very low income, and e PHA's jurisdiction. (select one of the choices below)	extremely low-income families
	The mission of the PHA is the same as that of the Department of Development: To promote adequate and affordable housing, equitable living environment free from discrimination.	
	The PHA's mission is: (state mission here)	
The go in rece object: ENCO OBJE number right of HUD	Coals  Deals and objectives listed below are derived from HUD's strategic Goals and Objectives as their own street. Whether selecting the HUD-suggested objectives or their own, PHAs AIDURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS CTIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measurers of families served or PHAS scores achieved.) PHAs should identify these measures for below the stated objectives.  Strategic Goal: Increase the availability of decent, safe, and	n, or identify other goals and/or RE STRONGLY SIN REACHING THEIR es would include targets such as: leasures in the spaces to the
	PHA Goal: Expand the supply of assisted housing Objectives:  Apply for additional rental vouchers: Reduce public housing vacancies: Leverage private or other public funds to create addition Acquire or build units or developments Other (list below)	nal housing opportunities:
	PHA Goal: Improve the quality of assisted housing Objectives:  Improve public housing management: (PHAS score) 93 Improve voucher management: (SEMAP score) Increase customer satisfaction: Concentrate on efforts to improve specific management (list; e.g., public housing finance; voucher unit inspection Renovate or modernize public housing units: Demolish or dispose of obsolete public housing: Provide replacement public housing: Provide replacement vouchers:	functions:

		Other: (list below)
	Object	Provide voucher mobility counseling: Conduct outreach efforts to potential voucher landlords Increase voucher payment standards Implement voucher homeownership program: Implement public housing or other homeownership programs: Implement public housing site-based waiting lists: Convert public housing to vouchers: Other: (list below) Continue with the operation of the homeownership program through the Section 8 HCV program. Try to maintain the FSS program without funding for a Coordinator. Apply for FSS Coordinator funding through next NOFA.
HUD	Strateg	ic Goal: Improve community quality of life and economic vitality
нтт	Object	Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: Implement public housing security improvements: Designate developments or buildings for particular resident groups (elderly, persons with disabilities) Other: (list below)
indivi		ic Goal: Promote self-sufficiency and asset development of families and
	PHA Object	Goal: Promote self-sufficiency and asset development of assisted households ives:  Increase the number and percentage of employed persons in assisted families:  Provide or attract supportive services to improve assistance recipients' employability:  Provide or attract supportive services to increase independence for the elderly or families with disabilities.  Other: (list below)
HUD	Strateg	ic Goal: Ensure Equal Opportunity in Housing for all Americans
$\boxtimes$	РНА С	Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

Other: (list below)

Other PHA Goals and Objectives: (list below)

PHA Name: **Traverse City Housing Commission** 5-Year Plan for Fiscal Years: **2008-2012** 

Continue through the process to acquire a local Rural Development 515 property. Consider the purchase of other potential apartment communities, keep with the mindset that the purchases would be to further the availability of affordable housing, with a mixture of market rate units, so as to deconcentrate poverty in any given part of our service area.

Create a benchmarking system to analyze the internal operations of our organization and other PHA's in our area.

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 $\square$ 

1 Housing Needs

## **Streamlined Annual PHA Plan**

#### PHA Fiscal Year 2008

[24 CFR Part 903.12(b)]

### **Table of Contents**

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

#### A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

	1. 110451115 1 (0045
	2. Financial Resources
$\boxtimes$	3. Policies on Eligibility, Selection and Admissions
$\boxtimes$	4. Rent Determination Policies
$\boxtimes$	5. Capital Improvements Needs
	6. Demolition and Disposition
$\boxtimes$	7. Homeownership
$\boxtimes$	8. Civil Rights Certifications (included with PHA Certifications of Compliance)
$\boxtimes$	9. Additional Information
	a. PHA Progress on Meeting 5-Year Mission and Goals
	b. Criteria for Substantial Deviations and Significant Amendments
	c. Other Information Requested by HUD
	<ol> <li>Resident Advisory Board Membership and Consultation Process</li> </ol>
	ii. Resident Membership on the PHA Governing Board
	iii. PHA Statement of Consistency with Consolidated Plan
	iv. (Reserved)
	10. Project-Based Voucher Program
	11. Supporting Documents Available for Review
$\boxtimes$	12. FY 2006 and FY 2007 Capital Fund Program and Capital Fund Program
	Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
$\boxtimes$	13. Capital Fund Program 5-Year Action Plan
	14. Other (List below, providing name for each item)

## B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, <u>PHA Certifications of Compliance with the PHA Plans and Related</u>
Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and
<u>Streamlined Five-Year/Annual Plans</u>;

<u>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</u>
For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions;

Form SF-LLL & SF-LLLa, <u>Disclosure of Lobbying Activities.</u>

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### **Executive Summary (optional)**

[903.7(r)]. If desired, provide a brief overview of the contents of the streamlined 5-Year/Annual Plan.

The Traverse City Housing Commission plan will demonstrate the programs that are currently in operation and the capacity in which we operate those programs. We continue to work on the upgrading and improving our apartment communities and the potential purchase of one or more apartment communities in our area.

The TCHC continues to operate to their fullest extent, the following programs:

- Low-Rent Housing Program (136 units)
- Section 8 Housing Choice Voucher Program (up to 198 vouchers)
- FSS Program (28 mandatory slots following 2 graduations)
- CDBG Program Coordinated with Grand Traverse County

## 1. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

## A. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the PHA's Waiting Lists				
Waiting list type: (select one)				
Section 8 tenant-based a	assistance			
□ Public Housing				
Combined Section 8 and	d Public Housing			
Public Housing Site-Ba				
If used, identify which	h development/subjuris			
	# of families	% of total families	Annual Turnover	
Waiting list total	166			
Extremely low income	129			
<=30% AMI				
Very low income	29			
(>30% but <=50% AMI)				
Low income	8			
(>50% but <80% AMI)				
Families with children	45	27		
Elderly families	30	18		
Families with Disabilities	91	55		
Race/ethnicity – <i>Black</i>	1	<1		
Race/ethnicity – <i>Hispanic</i>	1	<1		
Race/ethnicity - White	164	99		
Race/ethnicity				
		1		
Characteristics by Bedroom				
Size (Public Housing Only)				
1BR	121	73		
2 BR	0	0		
3 BR	38	23		
4 BR	7	4		
5 BR	0	0		

Hous	ing Needs of Families	s on the PHA's Waiting I	Lists
5+ BR			
Is the waiting list closed (selection)	ct one)? No 🔲 Y	Yes	
If yes:			
	closed (# of months)?		
		ne PHA Plan year? No	
□ No □ Yes	specific categories of	Tamines onto the waiting I	ist, even if generally closed?
Hous	ing Needs of Familie	s on the PHA's Waiting I	iete
Waiting list type: (select one)	ing recus of running	y on the Film by watching i	21313
Section 8 tenant-based a	assistance		
Public Housing			
Combined Section 8 and			
		al waiting list (optional)	
If used, identify which	h development/subjuri		
***	# of families	% of total families	Annual Turnover
Waiting list total	392		
Extremely low income	296	76	
<=30% AMI			
Very low income	88	22	
(>30% but <=50% AMI)			
Low income	8	2	
(>50% but <80% AMI) Families with children	206	53	
Elderly families	22	6	
Families with Disabilities	113	29	
Race/ethnicity - Black	9	2	
Race/ethnicity – <i>American</i>	2	<1	
Indian/Alaska Native			
Race/ethnicity – <i>Hispanic</i>	2	<1	
Race/ethnicity - White	379	97	
Characteristics by Bedroom			
Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (selection	ct one)? 🗌 No 🔯 Y	Yes	
If yes:			
	closed (# of months)?		<u> </u>
		ne PHA Plan year? No	
Does the PHA permit	specific categories of	ramilies onto the waiting l	ist, even if generally closed?

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#### **B.** Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families on the PHA's public housing and Section 8 waiting lists **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

### (1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1.	Maximize	the number	of affordable	e units ava	ailable to	the PHA	within its
current res	ources by:						

currer	nt resources by:		
Select a	ll that apply		
	Employ effective maintenance and management policies to minimize the number of public housing units off-line		
$\bowtie$	Reduce turnover time for vacated public housing units		
	Reduce time to renovate public housing units		
	Seek replacement of public housing units lost to the inventory through mixed finance development		
	Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources		
	Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction		
	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required		
$\boxtimes$	Maintain or increase section 8 lease-up rates by marketing the program to owners,		
	particularly those outside of areas of minority and poverty concentration		
	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program		
	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies		
	Other (list below)		
Strate	gy 2: Increase the number of affordable housing units by:		
	ll that apply		
X	Apply for additional section 8 units should they become available  Leverage affordable housing resources in the community through the creation of mixed –		
finance	e housing		
	Pursue housing resources other than public housing or Section 8 tenant-based		
	assistance.		
	Other: (list below)		
Need:	Specific Family Types: Families at or below 30% of median		
Strategy 1: Target available assistance to families at or below 30 % of AMI			
	Il that apply		

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	ne: <b>Traverse City Housing Commission</b> 5-Year Plan for Fiscal Years: <b>2008-2012</b> Annual Plan for FY <b>2008</b> : <b>MI080</b>
☐ ☑ that a	Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)  Coordinate with agencies that represent and serve households of race and ethnicities re disproportionately served in the community.
	gy 2: Conduct activities to affirmatively further fair housing
Select a	ll that apply
	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
	Market the section 8 program to owners outside of areas of poverty /minority concentrations
$\boxtimes$	Other: (list below)
units i	Provide information and counseling to Section 8 Participants of the location of known in the Traverse City Housing Commission 6 county service area.
Other	Housing Needs & Strategies: (list needs and strategies below)
	easons for Selecting Strategies factors listed below, select all that influenced the PHA's selection of the strategies it will ::
	Funding constraints Staffing constraints
	Limited availability of sites for assisted housing
	Extent to which particular housing needs are met by other organizations in the community
	Evidence of housing needs as demonstrated in the Consolidated Plan and other
_	information available to the PHA
Ц	Influence of the housing market on PHA programs
H	Community priorities regarding housing assistance
H	Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board
1 1	Acound of conduitation with restaction and the Nestacill Auvisory Duala
Π	·
	Results of consultation with advocacy groups Other: (list below)

## **2.** Statement of Financial Resources [24 CFR Part 903.12 (b), 903.7 (c)]

List on the following table the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

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	nancial Resources: ned Sources and Uses	
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 20 grants)		
a) Public Housing Operating Fund	\$ 196,425.00	
b) Public Housing Capital Fund	\$ 162,619.00	
c) HOPE VI Revitalization	\$ 0.00	
d) HOPE VI Demolition	\$ 0.00	
e) Annual Contributions for Section 8 Tenant- Based Assistance	\$1,088,025.00	
f) Resident Opportunity and Self-Sufficiency Grants	\$ 0.00	
g) Community Development Block Grant	\$ 150,000.00	Housing Rehabilitation
h) HOME	\$ 0.00	
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)	\$ 0.00	
3. Public Housing Dwelling Rental Income	\$ 339,409.00	Operation and Maintenance
4. Other income (list below)		
Roof Top Leases	\$ 55,800.00	Capital Improvements, Operations, etc.
<b>4. Non-federal sources</b> (list below)		
CDBG Administrative Fee	\$ 59,554.00	Salaries and Benefits
G.T. County - Comm. Residential Liaison Pos.	\$ 29,340.00	Salaries and Benefits
Total resources	\$2,081,172.00	

## 3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.12 (b), 903.7 (b)]

## A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

## (1) Eligibility

a. Whe	en does the PHA verify eligibility for admission to public housing? (select all that apply)
$\bowtie$	When families are within a certain number of being offered a unit: (state number) 10-20
	When families are within a certain time of being offered a unit: (state time)
	Other: (describe)

 $b.\ Which\ non-income\ (screening)\ factors\ does\ the\ PHA\ use\ to\ establish\ eligibility\ for\ admission$ 

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2. What is the number of site based waiting list developments to which families may apply

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## (4) Admissions Preferences

<ul> <li>a. Income targeting:</li> <li>Yes ∑ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?</li> </ul>
b. Transfer policies:  In what circumstances will transfers take precedence over new admissions? (list below)  Emergencies  Over-housed  Under-housed  Medical justfication  Administrative reasons determined by the PHA (e.g., to permit modernization work)  Resident choice: (state circumstances below)  Other: (list below)
c. Preferences  1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences:  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence  Substandard housing  Homelessness  High rent burden (rent is > 50 percent of income)
Other preferences: (select below)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in the jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space

HA Code: MI080 that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc. Date and Time Former Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden Other preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below) 4. Relationship of preferences to income targeting requirements: The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements (5) Occupancy a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply) The PHA-resident lease The PHA's Admissions and (Continued) Occupancy policy PHA briefing seminars or written materials Other source (list) b. How often must residents notify the PHA of changes in family composition? (select all that apply) At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)

PHA Name: **Traverse City Housing Commission** 5-Year Plan for Fiscal Years: **2008-2012** 

(6) De	concentration	and Income	Mixing				
a. 🗌	Yes No:	Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.					
b. 🗌	Yes No:	Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete. If yes, list these developments on the following table:					
		Deconcer	ntration Policy for Covered Develop	nents			
Develo	oment Name	Number of Units	Explanation (if any) [see step 4 at \$903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at \$903.2(c)(1)(v)]			
				<u> </u>			
Exempt Unless program  (1) Eli  a. Wh	gibility  at is the exten Criminal or of Criminal and More general References Other (list be	ied, all question d until complete to screening lrug-related actured trug-related actured screening that screening that slow)	er section 8 are not required to complete s in this section apply only to the tenely merged into the voucher program conducted by the PHA? (select a ctivity only to the extent required activity, more extensively than reactivity, more extensively than reactivity and drug-related activity.	ant-based section 8 assistance, certificates).  all that apply) by law or regulation equired by law or regulation vity (list factors): Landlord			
b. 🔀	Yes No: I		request criminal records from long purposes?	cal law enforcement agencies			
c. 🖂	Yes No: 1		request criminal records from S ng purposes?	tate law enforcement agencies			
d. 🗌	Yes No:		access FBI criminal records fro (either directly or through an NC				
	icate what kind oly)	ds of informat	ion you share with prospective la	andlords? (select all that			
	-	lrug-related ac be below)	etivity				

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## Last known landlord information – if known

## (2) Waiting List Organization

waiting list merge None Federal publi Federal mode Federal proje	e following program waiting lists is the section 8 tenant-based assistance ed? (select all that apply)  c housing erate rehabilitation et-based certificate program or local program (list below)
(select all that ap	lministrative office
(3) Search Time	
If yes, state circumsta	Does the PHA give extensions on standard 60-day period to search for a unit? ances below: The TCHC allows up to the maximum of 120 days (with y extensions) to find suitable housing. More time will be allowed if the ed or handicapped.
(4) Admissions Pref	<u>'erences</u>
a. Income targeting	
n	Does the PHA plan to exceed the federal targeting requirements by targeting nore than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
<ul><li>b. Preferences</li><li>1. ☐ Yes ☐ No:</li></ul>	Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
	owing admission preferences does the PHA plan to employ in the coming apply from either former Federal preferences or other preferences)

PHA Nam HA Code:	e: <b>Traverse City Housing Commission</b> 5-Year Plan for Fiscal Years: <b>2008-2012 MI080</b>	Annual Plan for FY 2008
	Homelessness High rent burden (rent is > 50 percent of income)	
Other p	Working families and those unable to work because of age or disabile. Veterans and veterans' families. Residents who live and/or work in your jurisdiction. Those enrolled currently in educational, training, or upward mobility. Households that contribute to meeting income goals (broad range of Households that contribute to meeting income requirements (targeting Those previously enrolled in educational, training, or upward mobility Victims of reprisals or hate crimes. Other preference(s) (list below)	programs incomes)
that rep If you a through	e PHA will employ admissions preferences, please prioritize by placing presents your first priority, a "2" in the box representing your second give equal weight to one or more of these choices (either through an an a point system), place the same number next to each. That means yourse, "2" more than once, etc.	priority, and so on. absolute hierarchy or
$\boxtimes$	Date and Time	
Former	Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden	Housing Owner,
Other p	Working families and those unable to work because of age or disabile Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility Households that contribute to meeting income goals (broad range of Households that contribute to meeting income requirements (targeting Those previously enrolled in educational, training, or upward mobility Victims of reprisals or hate crimes Other preference(s) (list below)	programs incomes) ag)
	ong applicants on the waiting list with equal preference status, how a d? (select one)  Date and time of application  Drawing (lottery) or other random choice technique	re applicants

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Fixed amount (other than general rent-setting policy)  If yes, state amount/s and circumstances below:	
Fixed percentage (other than general rent-setting policy)  If yes, state percentage/s and circumstances below:	
For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)	
e. Ceiling rents	
1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (selectione)	t
<ul> <li>Yes for all developments</li> <li>Yes but only for some developments</li> <li>No</li> </ul>	
2. For which kinds of developments are ceiling rents in place? (select all that apply)	
For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below)	
3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)	
Market comparability study Fair market rents (FMR) 95 <sup>th</sup> percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)	
f. Rent re-determinations:	
1. Between income reexaminations, how often must tenants report changes in income or fam	ily

composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)
<ul> <li>Never</li> <li>At family option</li> <li>Any time the family experiences an income increase</li> <li>Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \$200 monthly</li> <li>Other (list below)</li> <li>Family composition change must be reported at the time the change occurs</li> </ul>
g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?
(2) Flat Rents
a. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)  The section 8 rent reasonableness study of comparable housing  Survey of rents listed in local newspaper  Survey of similar unassisted units in the neighborhood  Other (list/describe below)  Current Fair Market Rents  B. Section 8 Tenant-Based Assistance
Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
(1) Payment Standards
Describe the voucher payment standards and policies.
a. What is the PHA's payment standard? (select the category that best describes your standard)  At or above 90% but below100% of FMR  100% of FMR  Above 100% but at or below 110% of FMR  Above 110% of FMR (if HUD approved; describe circumstances below)
b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) <i>N/A</i> FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area  The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket

PHA Nam HA Code:		5-Year Plan for Fiscal Years: 2008- 2012	Annual Plan for FY 2008
	Other (list below)		
	apply)		,
d. Hov	w often are payment standard Annually Other (list below)	Is reevaluated for adequacy? (select o	one)
	nat factors will the PHA consinect all that apply) Success rates of assisted fan Rent burdens of assisted fan Other (list below)		y of its payment standard?
(2) M	inimum Rent		
a. Wh	at amount best reflects the Pl \$0 \$1-\$25 \$26-\$50	HA's minimum rent? (select one)	
b. 🔀	policies? (if y	dopted any discretionary minimum rees, list below)  sts in the following circumstances:	ent hardship exemption
	for a Feder b. When the rent requir c. When the including l d. When the for medica e. When a de	family has lost eligibility for or is awaiting ral, State or local assistance program; family would be evicted as a result of the rement; income of the family has decreased becaused loss of employment; family has an increase in expenses becaused costs, childcare, transportation, education ath has occurred in the family.  If the Housing Commission determines the rent will be reinstated, including requiring the states of the commission for the time of suspensions.	e imposition of the minimum use of changed circumstances, use of changed circumstances, n, or similar items;  ere is no qualifying hardship, ag back payment of minimum
	hardship but th	rdship. If the Housing Commission determ that it is of a temporary nature, the minimu	m rent will not be imposed for

a period of 90 calendar days from the date of the family's request. At the end of the 90-

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day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Commission will offer a reasonable repayment agreement for any minimum rent back payment paid by the Housing Commission on the family's behalf during the period of suspension.

Annual Plan for FY 2008

Long-term hardship. If the Housing Commission determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.

## 5. Capital Improvement Needs

[24 CFR Part 903.12(b), 903.7 (g)]

Exemptions from Component 5: Section 8 only PHAs are not required to complete this component and may skip to Component 6.

## A. Capital Fund Activities

Exemptions from sub-component 5A: PHAs that will not participate in the Capital Fund Program may skip to

component 5B. All other	PHAs must complete 5A as instructed.
(1) Capital Fund Pro	ogram
a. Xes No	Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 12 and 13 of this template (Capital Fund Program tables). If no, skip to B.
b. Xes No:	Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).
B. HOPE VI and (Non-Capital Fun	Public Housing Development and Replacement Activities ad)
	onent 5B: All PHAs administering public housing. Identify any approved HOPE VI elopment or replacement activities not described in the Capital Fund Program Annual
(1) Hope VI Revitalia	zation
a.  Yes No:	Has the PHA received a HOPE VI revitalization grant? (if no, skip to next component; if yes, provide responses to questions on chart below for each grant, copying and completing as many times as necessary)
b.	Status of HOPE VI revitalization grant (complete one set of questions for each grant)

PHA Name: Traverse City Housing Commission 5-Year Plan for Fiscal Years: 2008-2012 Annual Plan for FY 2008 HA Code: MI080 Development name: Development (project) number: Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway c. Yes No: Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below: d. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below: e. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: 6. Demolition and Disposition [24 CFR Part 903.12(b), 903.7 (h)] Applicability of component 6: Section 8 only PHAs are not required to complete this section. a. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 or 24 (Hope VI)of the U.S. Housing Act of 1937 (42 U.S.C. 1437p) or Section 202/Section 33 (Mandatory Conversion) in the plan Fiscal Year? (If "No", skip to component 7; if "yes", complete one activity description for each development on the following chart.) **Demolition/Disposition Activity Description** 1a. Development name: 1b. Development (project) number: 2. Activity type: Demolition Disposition 3. Application status (select one) Approved Submitted, pending approval

5 Tr
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Timeline for activity:
a. Actual or projected start date of activity:
b. Projected end date of activity:

d. Demonstrating that it has other relevant experience (list experience below).

c. Partnering with a qualified agency or agencies to administer the program (list name(s) and

underwriting standards.

years of experience below).

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### 8. Civil Rights Certifications

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the *PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans,* which is submitted to the Field Office in hard copy—see Table of Contents.

### 9. Additional Information

[24 CFR Part 903.12 (b), 903.7 (r)]

## A. PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan

(Provide a statement of the PHA's progress against the goals and objectives established in the previous 5-Year Plan for the period FY 20**04** - 20**08**.

The TCHC has made strides towards the goals set in the previous 5-Year Plan. The Section 8 HCV Homeownership program has been established with one family transitioning into homeownership. The TCHC's PHAS score has hovered either in the Standard or the current High Performer status. The financial status of the TCHC has never been better. Efforts to bring new landlords into the Section 8 HCV program have been undertaken while partnering with local service organizations. The TCHC has met with and will continue to meet with the RAB to work out the details of the potential capital improvements to it's properties. Through the CFP, the TCHC has been able to rehabilitate 25 of 116 kitchens in it's high-rise and with approval for participation in the CFFP, will complete the remaining 91 kitchens, together with the installation of a new roof and generator. The TCHC continues to use its funding to modernize their communities whenever possible.

The TCHC continues to work on goals that were set in the previous 5-Year Plan such as increasing the number of affordable housing units in our area. We remain committed to the acquisition and rehabilitation of a local affordable apartment community utilizing low income housing tax credits and a loan through Rural Development. While this process has proven to be a long, arduous road, we remain steadfast in our intentions. As noted in this document, the TCHC will continue to try to bring services to its residents and continue to work with local service and support agencies to reach that population which may be unserved.

## **B.** Criteria for Substantial Deviations and Significant Amendments

#### (1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### a. Substantial Deviation from the 5-Year Plan

- Any change to rent or admissions policies or organization of the waiting lists;
- Additions of non-emergency work items when dollar amounts exceed 10% of Capital Fund Budget or the amount of replacement reserve funds that exceed 10% of the annual Capital Fund Budget;
- Any change with regard to demolition or disposition, designation,

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homeownership programs or conversion activities.

### b. Significant Amendment or Modification to the Annual Plan

- ➤ Any change to rent or admissions policies or organization of the waiting list;
- ➤ Additions of non-emergency work items when dollar amount exceed 10% of Capital Fund Budget or the amount of replacement reserve funds that exceed 10% of the annual Capital Fund Budget;
- ➤ And any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

## C. Other Information

[24 CFR Part 903.13, 903.15]

(1)	F	Resid	ent A	Adv	isory	Board	R	<b>Recommend</b>	lat	ions
-----	---	-------	-------	-----	-------	-------	---	------------------	-----	------

a. 🛛 Yes 🗌	No: Did the PHA receive any comments on the PHA Plan from the
	Resident Advisory Board/s?

If yes, provide the comments below:

- Consider adding the word "bullying" to the mission statement
- Consider using a "veteran" preference in placing applicants on the waiting list
- Consider completing the parking lot re-sealing of both properties at the same time
- If we are not able to reconfigure the nurse call system, consider moving the site lighting for Orchardview up one year
- Orchardview siding lower 4 feet a wood or concrete blend siding with additional insulation between siding and bottom slab
- Orchardview windows Double hung triple pane windows
- Landscaping Plant trees for shade, enlarge fences at each unit back door, approximately 8 foot on both sides of patio
- Kitchen rehabilitation at Orchardview A bank of drawers between stove and refrigerator lighter colored cabinets
- Orchardview Site lighting lower to the ground without upward light loss
- Orchardview Bathroom rehab Lighter cabinets, different lighting, exhaust fans and additional towel bars
- Riverview Terrace Water saving devises such as shower head and aerators

	what manner did the PHA address those comments? (select all that apply)
$\boxtimes$	Considered comments, but determined that no changes to the PHA Plan were
_	necessary.
	The PHA changed portions of the PHA Plan in response to comments
	List changes below:
$\boxtimes$	Other: (list below) The TCHC will definitely take under advisement made
	during the discussions with the RAB. All ideas have value and merit.

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## (2) Resident Membership on PHA Governing Board

The governing board of each PHA is required to have at least one member who is directly assisted by the PHA, unless the PHA meets certain exemption criteria. Regulations governing the resident board member are found at 24 CFR Part 964, Subpart E.

	s the PHA governing board include at least one member who is directly assisted by A this year?
Xe Ye	s No:
If yes,	complete the following:
Name o	of Resident Member of the PHA Governing Board: Richard Daniels
	d of Selection: Appointment The term of appointment is (include the date term expires): 5 years – Term is November 30, 2012
	Election by Residents (if checked, complete next sectionDescription of Resident Election Process)
	ption of Resident Election Process ation of candidates for place on the ballot: (select all that apply) Candidates were nominated by resident and assisted family organizations Candidates could be nominated by any adult recipient of PHA assistance Self-nomination: Candidates registered with the PHA and requested a place on ballot Other: (describe) Interested participants contact the City of Traverse City Clerk's office with a letter of interest
Eligible	e candidates: (select one) Any recipient of PHA assistance Any head of household receiving PHA assistance Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization Other (list)
Eligible	e voters: (select all that apply) All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance) Representatives of all PHA resident and assisted family organizations Other (list)
	e PHA governing board does not have at least one member who is directly assisted PHA, why not? $N/A$

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HA Code: MI080

## 10. Project-Based Voucher Program

a.	Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If yes, answer the following questions.
b.	Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option?
	If yes, check which circumstances apply:  Low utilization rate for vouchers due to lack of suitable rental units  Access to neighborhoods outside of high poverty areas  Other (describe below:)

There is a potential to work with a local non-profit who is in the process of obtaining funding to build a 24 unit apartment community and the local Foundation for Mental Health (FMH) organization in project basing HCV's. The apartment community that is in development would be 100% supportive housing, serving those persons who are at or below 30% AMI. The project is currently in the planning/funding stage and could potentially be on line by November 2009 if funding can be secured. The local FMH currently has two (2) communities devoted to supportive housing. Local studies show that supportive housing is an area of need that will continue to grow. It may also be possible to project base vouchers in other parts of our service area, depending upon need.

c. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

The TCHC would project base no more than 39 HCV. The actual number to be project based will be dependent upon the number of vouchers or the amount of budget authority that the TCHC has available.

## 11. List of Supporting Documents Available for Review for Streamlined Five-Year/ Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review							
Applicable	Related Plan Component							
&	&							
On Display								
On Display	PHA Certifications of Compliance with the PHA Plans and Related Regulations	Standard 5 Year and						
	and Board Resolution to Accompany the Standard Annual, Standard Five-Year,							
	and Streamlined Five-Year/Annual Plans.							
On Display	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans						
On Display	Fair Housing Documentation Supporting Fair Housing Certifications: Records	5 Year and Annual Plans						
	reflecting that the PHA has examined its programs or proposed programs, identified							
	any impediments to fair housing choice in those programs, addressed or is							
	addressing those impediments in a reasonable fashion in view of the resources							
	available, and worked or is working with local jurisdictions to implement any of the							
	jurisdictions' initiatives to affirmatively further fair housing that require the PHA's							
	involvement.							

A 1* 1 1	List of Supporting Documents Available for Review	Daladad Di C		
Applicable &	Supporting Document	Related Plan Component		
On Display		Annual Plan:		
On Display	the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.			
On Display	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources		
On Display	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.			
On Display	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing.   ☐ Check here if included in the public housing A&O Policy.	Policies Annual Plan: Eligibility, Selection, and Admissions Policies		
On Display	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies		
On Display	Public housing rent determination policies, including the method for setting public housing flat rents. ⊠ Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination		
On Display	Schedule of flat rents offered at each public housing development.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination		
On Display	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination		
Available for Review	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance		
On Display	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations		
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency		
On Display	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations		
On Display	Any policies governing any Section 8 special housing types	Annual Plan: Operations and Maintenance		
N/A	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management		
On Display	Public housing grievance procedures  ☐ Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures		
In Display	Section 8 informal review and hearing procedures.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures		
On Display	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs		
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs		
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs		
Available for Review	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs		
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition		

	List of Supporting Documents Available for Review			
Applicable &	Supporting Document	Related Plan Component		
On Display				
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing		
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing		
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing		
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership		
On Display	Policies governing any Section 8 Homeownership program (Section <b>Addendum 1</b> of the Section 8 Administrative Plan)	Annual Plan: Homeownership		
On Display	Public Housing Community Service Policy/Programs  ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency		
In Progress	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency		
On Display	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency		
In Progress	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency		
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency		
On Display	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).  Check here if included in the public housing A & O Policy.	Pet Policy		
On Display	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit		
N/A	Consortium agreement(s), if a consortium administers PHA programs.	Joint PHA Plan for Consortia		
N/A	Consortia Joint PHA Plans ONLY: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection	Joint PHA Plan for Consortia		
	Other supporting documents (optional). List individually.	(Specify as needed)		

# 12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Annu	al Statement/Performance and Evaluation Re	eport			
Capit	al Fund Program and Capital Fund Program	<b>Replacement Hous</b>	ing Factor (CFP/CFPF	RHF) Part I: Summ	ary
	ame: Traverse City Housing Commission	Grant Type and Number			
		Capital Fund Program Grant No: MI33P080501-08			
		Replacement Housing Factor Grant No:			
Morri	ginal Annual Statement Reserve for Disasters/ Emer	ganaias Davisad Ann	wal Statement (newigien ne	. )	2008
	formance and Evaluation Report for Period Ending:	<u> </u>	and Evaluation Report		
Line	Summary by Development Account		timated Cost	Total Actu	ıal Cost
Bine	Summary by Development Treesant	Original	Revised	Expended	
1	Total non-CFP Funds	<b>g</b>		Obligated	PP
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$106,656.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	9000 Collaterization or Debt Service	\$ 52,554.00			
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines $2-20$ )	\$159,210.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

# 12. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

Part II: Supporting Pages PHA Name: Traverse City Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P080501-08 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Es	stimated	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Debt Service Payment	9000	1	52,554				Waiting for Approval to participate
MI080-01	Elevator Rehabilitation	1475		106,656				Discussion Stage

Annual Statement				-			
Capital Fund Pro	gram and	Capital F	und Prog	gram Replac	ement Housi	ing Factor	(CFP/CFPRHF)
Part III: Impleme	entation S	chedule					
PHA Name: Traverse City Commission	y Housing	Capita	Type and Nur al Fund Progra cement Housin	m No: <i>MI33P08050</i>	Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities		Fund Obligate arter Ending Da			ll Funds Expended uarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI080 001	06/12/10			06/12/12			

	al Statement/Performance and Evaluation Report	noment Henring	Footom (CED/CE	DDIIE) Dont L. Cum	
	al Fund Program and Capital Fund Program Replac Name: Traverse City Housing Commission	Grant Type a Capital Fund 06	nd Number	Io: MI33P080501-	Federal FY of Grant: 7/2006
	iginal Annual Statement Reserve for Disasters/ En formance and Evaluation Report for Period Ending	mergencies 🖂 Re	evised Annual St		
Line	Summary by Development Account	Total Esti	mated Cost		Total Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$65,000.00	\$93,398.00	\$93,398.00	
10	1460 Dwelling Structures	\$58,810.00	\$34,514.00	\$34,514.00	
11	1465.1 Dwelling Equipment—Nonexpendable	\$7,500.00	\$15,075.00	\$15,075.00	
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$23,000.00	\$15,882.00	\$15,882.00	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency	0	0	0	
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$154,310.00	\$158,869.00	\$158,869.00	
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance	\$154,310.00	\$158,869.00	\$158,869.00	

Annual Statement Capital Fund Prog Part III: Impleme	gram and	Capital F		-	ement Hous	ing Factor	· (CFP/CFPRHF)
PHA Name: Traverse City	Housing		Type and Nun		01.06		Federal FY of Grant: 7/2006
Commission	Capital Fund Program No: MI33P080501-06 Replacement Housing Factor No:						
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)				l Funds Expended parter Ending Date	Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
MI080 001	07/18/08		05/07/08	07/18/10			
MI080 002	07/18/08		3/31/08	07/18/10			

	formance and Evaluation Report								
	and Capital Fund Program Replace	ment Housing	Factor (CI	FP/CFPRH	<b>F</b> )				
PHA Name: Traverse Co	PHA Name: Traverse City Housing Commission			nt No: MI33P		Federal FY of Grant: 7/2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Factor Grant No: ty Total Estimated Cost		Total A	Total Actual Cost		
				Original	Revised	Funds Obligated	Funds Expended		
MI080 001	Kitchen Upgrades	1460		40,000	34,514	34,514	34,514	Completed	
MI080 001	Generator Overhaul	1475		3,500	0	0	0	Did not do	
MI080 001	Entry Phone/Camera	1475		19,500	15,882	15,882	15,882	Completed	
MI080 001	Water Heater Replacement	1465		7,500	15,075	15,075	15,.075	Completed	
MI080 002	Landscaping, Site Sign & Apt. Number Improvements	1450		20,000	15,914	15,914	15,914	Completed	
MI080 001	Canopy – Front Sidewalk	1450		45,000	74,640	74,640	74,640	Completed	
MI080 002	Apartment Floor Replacement	1460		18,810	0	0	0	Did not do	
Project Wide	Contingency	1502		0	0	0			
MI080 001	Site Improvement - Staircase	1470		0	2,844	2,844	0	Use w/ 2007 CFP	
				154,310	158,869	158,869	156,025		

	l Statement/Performance and Evaluation Report Il Fund Program and Capital Fund Program Repla	coment House	ing Factor (C	FD/CFPDHF) Port I+ Si	ummory
	Name: Traverse City Housing Commission	Grant Type Capital Fun 07	and Number d Program Gr		Federal FY of Grant: 7/2007
	ginal Annual Statement Reserve for Disasters/ F formance and Evaluation Report for Period Endin	mergencies [	Revised An	nual Statement (revision	
Line	Summary by Development Account	Total Estir		ormance and Evaluation	Total Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds			-	•
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	35,000	35,000		
10	1460 Dwelling Structures	76,619	64,619		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency		10,446		
20	9000 Collaterization or Debt Service	51,000	52,554		
21	Amount of Annual Grant: (sum of lines 2 – 20)	162,619	162,619		
22	Amount of line 21 Related to LBP Activities	-			
23	Amount of line 21 Related to Section 504 compliance				

Part II: Supporting Pa						1			
PHA Name: Traverse C	ity Housing Commission	Grant Type a			200501 07	Federal FY of Grant: 7/2007			
	Capital Fund Replacement								
Development Number	General Description of Major Work	Dev. Acct	1 5			Total Ac	Status of		
Name/HA-Wide	Categories	No.						Work	
Activities									
				Original	Revised	Funds	Funds		
						Obligated	Expended		
MI 080 001	Landscaping	1450	1	10,000					
MI 080 002	Water Heater Replacement	1465	0	12,000	0				
MI 080 002	Heat Run Fascia Replacement	1460	20	42,119					
MI 080 002	Retile 1 <sup>st</sup> Floor in Apartments	1460	20	22,500					
HA Wide	Debt Service Payment	9000	1	51,000	52,554				
MI 080 001	Replace Boardwalk w/ Concrete	1450	1	25,000					
HA Wide	Contingency	1502	1		10446				

Capital Fund Prog	Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule											
PHA Name: Traverse City	Housing		Type and Nur		Federal FY of Grant: 7/2007							
Commission		_	al Fund Progra cement Housin	m No: MI33P0805 ng Factor No:								
Development Number	All	Fund Obligate	ed	A	Il Funds Expended	Reasons for Revised Target Dates						
Name/HA-Wide	(Qua	arter Ending D	ate)	(Q	uarter Ending Date							
Activities												
	Original	Revised	Actual	Original	Revised	Actual						
MI080 001	07/18/09			07/18/11								
MI080 002	07/18/09			07/18/11								

Annual States	ment/Performance and Evaluation Report				
<b>Capital Fund</b>	<b>Program and Capital Fund Program Replacement Housing Factor</b>	(CFP/CFPRHF)	Part I: Sun	nmary	
PHA Name:		Grant Type and	Number		Federal FY of Grant:
	MI080 Traverse City Housing Commission	Capital Fund Pro Replacement Hot Grant No:	-		Cap Fund Borrowing
,   _	and Evaluation Report for Period Ending	Revision Number	ı Report		
Line No.	Summary by Development Account	Total Estin	nated Cost	Total Ac	tual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	19,561		19,561	19,561
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	605,825			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				

16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1499 Development Activities			
19	1501 Collaterization or Debt Service	34,755	34,755	34,755
20	1502 Contingency	1,334		
21	Amount of Proposed Project: (sum of lines 2 – 20)	661,475	54,316	54,316
22	Amount of line 21 Related to LBP Activities			
23	Amount of line 21 Related to Section 504 compliance			
24	Amount of line 21 Related to Security – Soft Costs			
25	Amount of Line 21 Related to Security – Hard Costs			
26	Amount of line 21 Related to Energy Conservation Measures			

This budget is subject to the approval of the Capital Funds Financing.

**Annual Statement/Performance and Evaluation Report** 

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

**Part II: Supporting Pages** 

PHA Name: MI080 Traverse City	Housing Commision	Capital I		mber m Grant No: ng Factor Gr	Federal FY of Grant: Capital Fund Borrowing				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.		Quantity	Total Estimated Cost		Total Ad	Status of Work	
					Original	Revised	Funds Obligate d	Funds Expended	
	Fees and Costs								
PHA Wide	Loan Costs of Issuance		1430		19,561		19,561	19,561	
	Total Fees and Costs		1430		19,561		19,561	19,561	
	<u>Dwelling Structures</u>								
MI080-01	Kitchen Rehab - Barrier Free Units								
Riverview Terrace	Replace Range Hood		1460	8	1,080				
	Replace Faucet		1460	8	760				
	Replace Countertop		1460	8	6,400				

	Replacement of cabinetry and lighting including: demolition of pantry and cabinetry/Construction of new wall and flooring	1460	8	30,400			
	Kitchen Rehab - Non-Barrier Free					_	
	Replace Faucet	1460	83	7,885		_	
	Replace Countertop	1460	83	41,500			
	Replacement of cabinetry and lighting including: demolition of pantry and cabinetry/Construction of new wall and flooring	1460	83	315,400			
	Total Kitchen Rehab			403,425			
		4.400					
MI080-01	Roof	1460	1	75,000			
Riverview Terrace	Generator	1460	1	35,000		_	
	Water Heater Replacement	1460	91	21,400		_	
MI080-02	Water Heater Replacement	1460	20	11,000			
Orchardview	Roofs	1460	6	60,000			
	Total 1460			605,825			
PHA Wide	Contingency	1502		1,334			
	<u> </u>	1.532		.,			
PHA Wide	Collaterization or Debt Service	1501					
	Capitalized Interest			8,478	8,478	8,478	

Debt Service Reserve		26,277	26,277	26,277	
Total Collaterization	1501	34,755	34,755	34,755	
_			 		
GRAND TOTAL		661,475	54,316	54,316	

#### **Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule Grant Type and Number** PHA Name: **Federal FY of Grant:** MI080 Traverse City Housing Capital Fund Program No: **Capital Fund Borrowing** Commision Replacement Housing Factor No: All Funds Expended Development Number All Fund Obligated Reasons for **Revised Target** Name/HA-Wide Activities (Quarter Ending Date) (Quarter Ending Date) Dates Original Original Revised Revised Actual Actual 04/01/12 MI080-01 04/01/10 **Riverview Terrace** 04/01/12 MI080-02 04/01/10 Orchardview 04/01/12 **PHA Wide** 04/01/10

Capital Fund Program Five-Year Action Plan							
Part I: Summary							
PHA Name Traverse Cit y Housing				⊠Original 5-Year Plan			
Commission				Revision No:			
Development Number/Name/HA-	Year 1	Work Statement for Year					
Wide		2	3	4	5		
		FFY Grant: 2009	FFY Grant: 2010	FFY Grant: 2011	FFY Grant: 2012		
		PHA FY:	PHA FY:	PHA FY:	PHA FY:		
	A						
	Annual Statement						
HA Wide	Statement	Debt Service Payment	Debt Service Payment	Debt Service Payment	Debt Service Payment		
MI080-001		Dumpster Chute Doors	Parking Lot Seal/Repair	Replace Locksets	Replace Entry Card		
		<b></b>	<b>g</b>	<b>.</b>	System		
MI080-001		Shower Valve Replace.	Reconfigure Nurse Call	Site Lighting	Rehabilitate Lobby Area		
		_	System	Replacement	,		
MI080-002		Window Replacement	Siding	Parking Lot Seal/Repair	Flooring Replacement		
MI080-002		Expand Bus Stop Area	Interior Door	Lockset/Dead bolts	Site Lighting		
			Replacement		Replacement		
MI080-001		Landscaping	Landscaping	Landscaping	Landscaping		
MI080-002		Landscaping	Landscaping	Landscaping	Landscaping		
MI080-001			Ceiling Fans	Apartment Door	Apartment Door		
				Repaint	Repaint		
MI080-002		Kitchen Rehabilitation	Kitchen Rehabilitation	Bathroom	Bathroom		
				Rehabilitation	Rehabilitation		
CFP Funds Listed for 5-year		\$192,054	\$265,054	\$179,554	\$197,554		
planning		. ,	. ,	. ,	. ,		
Replacement Housing Factor Funds							
Replacement Housing Factor Funds							

Capi	ital Fund Program Fiv	ve-Year Action Plan				
Part II: Sup	porting Pages—Worl	k Activities				
Activities for	Ac	tivities for Year :2009		Activities for Year: 2010		
Year 1		FFY Grant:	FFY Grant:			
		PHA FY:	PHA FY:			
	Development	Major Work	Estimated	Development	Major Work	Estimated
	Name/Number	Categories	Cost	Name/Number	Categories	Cost
See	HA Wide	Debt Service	\$52,554	HA Wide	Debt Service	\$52,554
Annual	MI080-001	Dumpster Chute Door	\$20,000	MI080-001	Parking Lot	\$50,000
	7.77000.007	Repair	420.000	7.77000.000	Repair/Seal	440.000
Statement	MI080-001	Shower Valve Replacement	\$30,000	MI080-001	Reconfigure Nurse Call System	\$30,000
	MI080-002	Window Replacement	\$40,000	MI080-002	Siding	\$60,000
	MI080-002	Enlarge Bus Stop	\$12,500	MI080-002	Replace Interior Doors	\$15,000
	MI080-001	Landscaping	\$5,000	MI080-001	Landscaping	\$5,000
	MI080-002	Landscaping	\$5,000	MI080-002	Landscaping	\$5,000
	MI080-002	Kitchen Rehabilitation	\$27,500	MI080-001	Ceiling Fans	\$20,000
				MI080-002	Kitchen Rehabilitation	\$27,500
	Total CFP Estimate	ed Cost	\$192,554			\$265,054

Work Activities For Year : 2011 Grant: IA FY: Major Work Categories Debt Service Replace Locksets  Sight Lighting Replacement	\$52,554 \$10,000 \$50,000	Activ  Development Name/Number  HA Wide  M1080-001	ities for Year: 2012 FFY Grant: PHA FY: Major Work Categories Debt Service Replace Entry Card	Estimated Cost \$52,554
Y Grant: IA FY: Major Work Categories Debt Service Replace Locksets  Sight Lighting	\$52,554 \$10,000	Development Name/Number  HA Wide	FFY Grant: PHA FY: Major Work Categories Debt Service	\$52,554
IA FY: Major Work Categories Debt Service Replace Locksets  Sight Lighting	\$52,554 \$10,000	HA Wide	PHA FY:  Major Work  Categories  Debt Service	\$52,554
Major Work Categories Debt Service Replace Locksets Sight Lighting	\$52,554 \$10,000	HA Wide	Major Work Categories <i>Debt Service</i>	\$52,554
Categories  Debt Service  Replace Locksets  Sight Lighting	\$52,554 \$10,000	HA Wide	Categories  Debt Service	\$52,554
Debt Service Replace Locksets Sight Lighting	\$10,000		Debt Service	
Replace Locksets  Sight Lighting	\$10,000			
Sight Lighting	. ,	MI080-001	Replace Entry Card	¢25 000
	\$50,000		System	\$25,000
керіасетені	\$30,000	MI080-001	Rehabilitation of Lobby Area	\$30,000
king & BB Court Re- seal	\$20,000	MI080-002	Flooring Replacement	\$20,000
Lockset/Dead Bolt Replacement	\$7,000	MI080-002	Sight Lighting Replacement	\$30,000
Landscaping	\$5,000	MI080-001	Landscaping	\$5,000
Landscaping	\$5,000	MI080-002	Landscaping	\$5,000
rtment Door Repaint	\$15,000	MI080-001	Apartment Door Repaint	\$15,000
Bathroom Rehabilitation	\$15,000	MI080-002	Bathroom Rehabilitation	\$15,000
	¢170 554			\$197,554
	Bathroom	Bathroom \$15,000 Rehabilitation	Bathroom \$15,000 MI080-002 Rehabilitation	Bathroom \$15,000 MI080-002 Bathroom Rehabilitation